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CONFIRMATION NO. 9441

<b>SERIAL NUMBER</b> 10/520,113	<b>FILING OR 371(c) DATE</b> 01/03/2005 <b>RULE</b>	<b>CLASS</b> 128	<b>GROUP ART UNIT</b> 3738	<b>ATTORNEY DOCKET NO.</b> 0523-1019
<b>APPLICANTS</b> Francois Michel, Thonon Les Baines, FRANCE;				
<b>** CONTINUING DATA *****</b> This application is a 371 of PCT/FR03/01333 04/29/2003 <i>ok</i>				
<b>** FOREIGN APPLICATIONS *****</b> FRANCE 02/08248 07/02/2002 <i>ok</i>				
<b>** SMALL ENTITY **</b>				
Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged <i>[Signature]</i> Examiner's Signature Initials		<b>STATE OR COUNTRY</b> FRANCE	<b>SHEETS DRAWING</b> 4	<b>TOTAL CLAIMS</b> 7  <b>INDEPENDENT CLAIMS</b> 2
<b>ADDRESS</b> 00466				
<b>TITLE</b> Pseudoaccommodative equipment implanted for presbyopia correction				
<b>FILING FEE RECEIVED</b> 450	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	